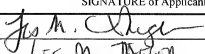


HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY and CHANGE OF CORRESPONDENCE ADDRESS</b>		<i>Application/Patent Number</i>	6,894,027
		<i>Filing/Issue Date</i>	May 17, 2005
		<i>First Named Inventor/Patentee</i>	Darrell H. Carney
		<i>Confirmation Number</i>	6715
		<i>Group Art Unit</i>	1647
		<i>Examiner Name</i>	Regina M. Deberry
		<i>Attorney Docket Number</i>	3033.1002-004
<i>Title</i>	STIMULATION OF BONE GROWTH WITH THROMBIN PEPTIDE DERIVATIVES		
I hereby revoke all previous powers of attorney given in the above-identified application.			
<input type="checkbox"/> I hereby appoint the following practitioner(s): <u>[Not to exceed 10]</u>			
OR			
<input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: <b>48329</b>			
Please change the correspondence address for the above-identified application to:			
<input checked="" type="checkbox"/> <b>Customer Number 48329</b> Foley & Lardner LLP 111 Huntington Avenue Boston, Massachusetts 02199-7610			
<input type="checkbox"/> Other			
Please direct all telephone calls and facsimiles to:			
Name <u>Steven G. Davis, Esq.</u>		Tel. No. <u>(617) 342-4000</u>	Fax No. <u>(617) 342-4001</u>
I am the:			
<input type="checkbox"/> Applicant/Inventor.			
<input checked="" type="checkbox"/> Authorized representative of the Assignee, Capstone Therapeutics, Formerly known as Orthologic Corp., of the entire interest. See 37 CFR § 3.71. A Statement under 37 CFR § 3.73(b) is enclosed.			
<input type="checkbox"/> Authorized representative of the Assignee, [ FILL IN WITH NAME OF ASSIGNEE ], together with [ FILL IN WITH NAME OF ASSIGNEE ], of the entire interest. A Statement under 37 CFR § 3.73(b) is enclosed.			
SIGNATURE of Applicant or Assignee of Record			
Signature			
Name & Title	LES M. Thelander CFO		
Date	7-13-2009		